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PATENT APPLICATION FEE DETERMINATION RECORD
Substitute for Form PTO-875Application or Docket Number
041860128

CLAIMS AS FILED - PART I

(Column 1)		(Column 2)
FOR	NUMBER FILED	NUMBER EXTRA
BASIC FEE (37 CFR 1.16(a))		
TOTAL CLAIMS (37 CFR 1.16(c))	minus 20 =	*
INDEPENDENT CLAIMS (37 CFR 1.16(b))	minus 3 =	*
MULTIPLE DEPENDENT CLAIM PRESENT	(37 CFR 1.16(d))	

* If the difference in column 1 is less than zero, enter "0" in column 2.

SMALL ENTITY		OR	OTHER THAN SMALL ENTITY	
RATE	FEES		RATE	FEES
	\$			\$
X \$	=		X \$	=
X \$	=		X \$	=
+ \$	=		+ \$	=
		TOTAL		TOTAL

CLAIMS AS AMENDED - PART II

(Column 1)		(Column 2)	(Column 3)
AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total (37 CFR 1.16(c))	13	Minus	** 20 = 4
Independent (37 CFR 1.16(b))	3	Minus	*** 3 = 4
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))			

SMALL ENTITY		OR	OTHER THAN SMALL ENTITY	
RATE	ADDITIONAL FEE		RATE	ADDITIONAL FEE
X \$	=		X \$	=
X \$	=		X \$	=
+ \$	=		+ \$	=
		TOTAL ADD'L FEE		TOTAL ADD'L FEE

(Column 1)		(Column 2)	(Column 3)
AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total (37 CFR 1.16(c))		Minus	** =
Independent (37 CFR 1.16(b))		Minus	*** =
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))			

RATE		ADDITIONAL FEE	RATE		ADDITIONAL FEE
X \$	=		X \$	=	
X \$	=		X \$	=	
+ \$	=		+ \$	=	
		TOTAL ADD'L FEE			TOTAL ADD'L FEE

(Column 1)		(Column 2)	(Column 3)
AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total (37 CFR 1.16(c))		Minus	** =
Independent (37 CFR 1.16(b))		Minus	*** =
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))			

RATE		ADDITIONAL FEE	RATE		ADDITIONAL FEE
X \$	=		X \$	=	
X \$	=		X \$	=	
+ \$	=		+ \$	=	
		TOTAL ADD'L FEE			TOTAL ADD'L FEE

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".
*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

PATENT APPLICATION FEE DETERMINATION RECORD
Effective October 1, 2000

Application or Docket Number

29186428

CLAIMS AS FILED - PART I

(Column 1) (Column 2)

TOTAL CLAIMS	13	
FOR	NUMBER FILED	NUMBER EXTRA
TOTAL CHARGEABLE CLAIMS	13 minus 20 =	
INDEPENDENT CLAIMS	minus 3 =	
MULTIPLE DEPENDENT CLAIM PRESENT <input type="checkbox"/>		

SMALL ENTITY
TYPE

OTHER THAN
OR SMALL ENTITY

RATE	FEES
BASIC FEE	355.00
XS 9=	
X40=	
+135=	
TOTAL	

RATE	FEES
BASIC FEE	710.00
XS18=	
X80=	
+270=	
OR TOTAL	710

* If the difference in column 1 is less than zero, enter "0" in column 2

CLAIMS AS AMENDED - PART II

(Column 1) (Column 2) (Column 3)

AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total	Independent		
	13	3	Minus	20 = \$
			***	3 = \$
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>				

SMALL ENTITY OR OTHER THAN
OR SMALL ENTITY

RATE	ADDI- TIONAL FEE	RATE	ADDI- TIONAL FEE
XS 9=		XS18=	
X40=		X80=	
+135=		+270=	
TOTAL ADDIT. FEE		TOTAL ADDIT. FEE	

AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total	Independent		
	13	3	Minus	20 = \$
			***	3 = \$
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>				

RATE	ADDI- TIONAL FEE	RATE	ADDI- TIONAL FEE
XS 9=		XS18=	
X40=		X80=	
+135=		+270=	
TOTAL ADDIT. FEE		TOTAL ADDIT. FEE	

AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total	Independent		
	13	3	Minus	20 = \$
			***	3 = \$
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>				

RATE	ADDI- TIONAL FEE	RATE	ADDI- TIONAL FEE
XS 9=		XS18=	
X40=		X80=	
+135=		+270=	
TOTAL ADDIT. FEE		TOTAL ADDIT. FEE	

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.